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	MTH NO PARTY	AFFILIATION '	_
(Sections	875.05-375,10, Florida S	Statutes) STEVES SEFVE	t.
			i
STATE OF FLORIDA		Miami-Dade	COUNTY
	(m) = 1.00 mon = 1		
	(PLEASE PRINT)	1	
	11	Martin	}
, Louis		Martinez	
· iz gr ( wat a ca	Middle Name/Initial		lame
a citizen of the State of Florida and of the Unite	d States of Americ	a, and a candidate for	r public office do
nereby sciemnly swear or affirm that I will suppo	ort the Constitution	cf the United States and	of the State of Florida.
		~ . ~ T	
	OF CAND		•
(Sec	zion 99.021, Fiorida Sta	rutes)	
i /		•	
- Louis	Vartine	Y NOT BE CHANGED AFTER THE END	OF CLIALIFYING:
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR O	N THE BALLUT - NAME IN		O
am a candidate for the office of	( DAM SS	due, NA	• N/A •
<del></del>	(office)	(district)	(circuit)
. I am a qualified elector of	Miami-	Dade County,	Florida.
(nenum)		•	•
I am a munified alactor of the City of Miami	Beach, Florida. I	am qualified under the o	ordinances and Charter
- of said City, and under the Constitution and	f the laws of Fig	naz to nola life office u	1 Willfill I desure to pe
- naminated or elected. I have qualified for p	io other bublic bit	ice in the state, the term	Of Millicia office of grid.
part thereof runs concurrent with the office	e i seek; and i n	lave resigned from any o	trice from which I am
required to resign pursuant to Section 99.01	2, Florida Statute:	ş.	
UNDER PENALTIES OF PERJURY, I DECLARE	THAT I HAVE REAL	THE FOREGOING LOYA	LTY OATH AND OATH OF
CANDIDATE AND THAT THE FACTS STATED IN	NEACH ARE TRUE	<u>.</u>	
		•	
X			
SIGN			
	<i></i>	Mr.	
HERE	1 1/ 1	//mil	
		Signature of Candidate	
7/50 (11)	ا. ا	13051672-0561	13051672-85
	ve	Cay Phone	Fax Number
Mailing Address		- Thomas	
		;	$\alpha l_{-} l_{-}$
Miani Beach	El .	33140	9/7/01
CHY CHY	rr	Zip Code	Data Signed
	144 W		

State

City

## FORM 1

## STATEMENT OF FINANCIAL INTERESTS

2000

TINANCIAL INTERESTS							
LAST NAME FIRST NAME MIDDLE NAM	Ε:	NAME OF REPORTING PERSON'S AGENCY:					
Martinez Loui				11 (3: 20)			
MAILING ADDRESS:		City of	N	liami Beach			
2655 Callins	4	CHECK <u>ONE</u> OF THE FOLI	_OWING (s	ee "Who Must File" on page 3):			
Lass Colliss	772	LOCAL OFFICE	ER 🔲	STATE OFFICER			
Add in Branch Cl	3140 Pare	CANDIDATE		SPECIFIED STATE EMPLOYEE			
CITY: 7IP:	COUNTY:	LIST OFFICE OR POSITIO	N HELD OF	R SOUGHT:			
		City Co	omn	155 Burer			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANC A FISCAL YEAR. PLEASE STATE BELOW WH DECEMBER 31, 2000	HETHER THIS STATEMENT IS	RECEDING TAX YEAR, WHET S FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN	YEAR END	NG EITHER (check one):			
MANNER OF CALCULATING REPORTABLE I PRIOR TO 2001, THE THRESHOLDS FOR RE UES. BEGINNING IN 2001, THE LEGISLATUR DOLLAR VALUES, WHICH REQUIRES FEWER MENT REFLECTS EITHER (check one):  COMPARATIVE (PERCENTAGE	PORTING FINANCIAL INTER RE HAS ALLOWED FILERS TI R CALCULATIONS (see instru	HE OPTION OF USING REPO ctions for further details). PLE	RTING THI ASE STATE	RESHOLDS THAT ARE ABSOLUTE			
			<u></u>	,			
PART A PRIMARY SOURCES OF INCOME NAME OF SOURCE	[Major sources of income to to SOUR		DESCR	IPTION OF THE SOURCE'S			
OF INCOME	ADDR		PRINCIPAL BUSINESS ACTIVITY				
COOK Cousty's States	2650 5. 0	ali farnia	Assistant States				
atterner's office	des l'ace			ver until Tune			
ATTOLINY'S DIFICE	700 1.452						
			7001				
			l L				
10 445 01	ME [Major customers, clients, ME OF MAJOR SOURCES F BUSINESS'S INCOME	ADDRESS OF SOURCE	o businesse	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
Boomeso extric				2 3			
/// / <del>/</del>							
1 6							
				- A - 3			
PART C - REAL PROPERTY [Land, building:	s awned by the reporting person  54000 Prive  7 Sold	unit 14B	when locate	G INSTRUCTIONS for and where to file this form are d at the bottom of page 2.  RUCTIONS on who must file orm and how to fill it out begin			
28, 7001				ge 3 of this packet.			
				ER FORMS you may need to e described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
Proferred Checking		Sacins		Banco	Popular		
Cook Cousty No	tilement .	hetiren	1497	flan			
fund		<del> </del>	· · · · · · · · · · · · · · · · · · ·		<del></del>		
		<del>-</del>			<del></del>		
l							
PART E — LIABILITIES [Major deb			A	DDRESS OF CREDI	TOR		
	1 Services	10.		<del></del>			
		Reading	PA	19612			
			<del></del>				
PART F INTERESTS IN SPECIFI			·				
NAME OF	BUSINESS ENTITY	#1	BUSINESS E	ENTITY # 2	BUSINESS ENTITY # 3		
BUSINESS ENTITY ADDRESS OF		// //					
BUSINESS ENTITY PRINCIPAL BUSINESS		<del>/ A</del>			······································		
ACTIVITY POSITION HELD WITH ENTITY		<del>/- /- /-  </del>	<del></del>				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	t		· <u> </u>				
NATURE OF MY OWNERSHIP INTEREST	<u> </u>						
	HROUGH F ARE C	ONTINUED ON	A SEPARA	TE SHEET, PLE	ASE CHECK HERE		
SIGNATURE	1_ //Mr	V/		DATE SIGNED:	9/7/01		
			NY COME O		7 6/ - (		
FILING INSTRUCTIONS:							
WHAT TO FILE:	WHE	RE TO FILE:		WHE	N TO FILE:		

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers file with the Supervisor of Elections of the county in which you permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.).

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

Candidates file this form together with your qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

## WHEN TO FILE:

initially, each local officer, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

After completing all parts of this form, including

signing and dating it, send back only the first

NOTE: MULTIPLE FILING UNNECES-

Generally, a person who has filed Form 1 for a

calendar or fiscal year is not required to file a sec-

ond Form 1 for the same year. However, a candi-

date who previously filed Form 1 because of

another public position must at least file a copy of

his or her original Form 1 when qualifying.

sheet (pages 1 and 2) for filing.

SARY: